



Cumbria Local Involvement Network

Visit Report

**Heversham House, Heversham,
Milnthorpe
LA7 7ER**

Contents

Cumbria Local Involvement Network (LINK)	3
Purpose of Visit	3
Methodology	3
LINK Visiting Team Findings	4
General	7
Circulation	7
Contact Details	7

Cumbria Local Involvement Network (LINK)

Local Involvement Networks (LINKs) were established in April 2008 to give people the opportunity to influence local health and care services by representing their views to those responsible for the planning, commissioning and delivery of services.

LINKs may, in certain circumstances, enter health and social care premises to observe and assess the nature and quality of services and obtain the views of the people using those services. Properly conducted and co-ordinated visits, carried out as part of a constructive relationship between LINKs and organisations commissioning and/or providing health and social care services, may enable ongoing service improvement. LINKs' role is not to seek out faults with local services, but to consider the standard and provision of care services and how they may be improved.

Purpose of Visit

Cumbria LINK Visiting Team will be looking to gather a snap shot of individual residents personal experiences of what life is like for them living day to day in that particular residential establishment.

Methodology

Cumbria LINK were approached by Adult Social Care to carry out visits to specific residential homes named by them, specifically asking for residents views about their care and how 'at home' they feel.

The LINK Visiting Team has been drawn from the membership of the LINK. Those members who volunteered to be part of the LINK Visiting team have received appropriate training in Safeguarding (level 1), Interviewing Skills, Listening Skills and LINK Visiting training. Further training opportunities will be available as and when required

A questionnaire was designed by the team to help them gather the resident's perspectives of their day. The questionnaire was designed to include prompts for the visiting team members. Residents were not given the questionnaires to complete on their own.

If individual residential homes request a copy, this will be sent in advance of the visit.

This particular visit was carried out by the following LINK Visiting team members:

Ruth Peter
Liz Clegg
Supported by Kay McGregor

LINK Visiting Team Findings:

First impressions:

This particular home is in a rural village, opposite the local church. The house itself has a walled garden, which, even at this time of year was looking well kept. There was evidence of raised beds, specially done so that residents were able to go out in the summer months and do a bit of gardening for themselves.

The members of the Visiting team were given a warm welcome and taken to the reception area where they were asked to sign the visitor's book for health and safety reasons. A flower arrangement sat on the desk and there were shelves of books next to it. The home did not smell institutional. The Manager took the team into the lounge/dining room which was light and airy with views onto the walled garden. This room was very pleasant and was decorated with 'family' photographs. Some of the beautiful tapestries on the wall had been done by the Manager's daughter. There were some more fresh flowers on display from Mother's Day. It felt and looked homely. The Manager came across as an open, warm, approachable and informed person with a good sense of humour. She discussed some of the residents with the team, and knew a lot about every one of them.

Mornings:

Most of the residents took their breakfast in their bedrooms with the home staff dealing with most resident's medication. The impression was given that residents were actively encouraged to bathe or shower, although it was explained that most were of the 'strip wash' generation. Residents could decide when and if they wished to do either. Although two residents had left for hospital appointments on the morning of this visit it was noticed that during the morning no one arrived to sit in the lounge. There was a large notice board situated in the lounge informing of the weather forecast, menu for the day, and list of activities.

Most residents were occupied with the TV in their own rooms, one was reading the paper, another was listening to music and knitting. Only one resident was observed having a doze.

Lunchtime:

Residents may eat in their rooms if they wish, and while the team were there they observed three trays being carried up to residents in their rooms with adequate portions. Lunch was being cooked during the visit and the food smelt appetising. A choice of menu was given. The menu book was shared with the team while visiting the spotless kitchen. They were told that the residents were of the 'meat and two vegetable' generation and were happy with what they were given. The menu book indicated a varied, healthy and tempting selection of meals. Residents were offered something different if they did not fancy what was on offer

Afternoon:

The team were told that some residents can go out in the afternoon, or they may have relatives or friends visiting them.

The visit took place in the morning although it was noticed on the board the day was to be spent in 'free activity'.

Evening:

The lounge has a large TV and the Manager indicated that this was much liked by the residents who have compared it to 'being at the cinema'. The team did not pick up any further information about evening activities

Night time:

Residents are given any necessary help they require to prepare when they wish to go to bed. One member of staff patrols the home and looks in on residents on a regular basis, more frequently if they are unwell. In addition there is a 'sleeping' member of staff in-house who is on call. The Manager told us that she frequently fulfils that function.

Privacy and Dignity:

The atmosphere of the home is informal and all residents were called by their first names and had their own rooms although most were not en-suite. Doors in general were open so that residents could see what was going on but when shut, the Manager knocked first before entering. During the visit she was asked at one point to close the door as we left and did so. All residents praised the home throughout and none mentioned lack of privacy or dignity. I felt as though it was not even an issue.

Religious & Cultural Beliefs:

It was understood that the residents were Christian, and both Anglican and Roman Catholic services were held at the home on a regular basis. The home is situated opposite a church and residents can attend services there if they wish. The Manager told us she is currently concerned about visits from Jehovah's Witnesses to one of her residents, because they try to talk to her other residents. She has had to ask them to leave on a couple of occasions to protect her other residents. As she says she is happy for them to visit the lady who invites them but not for them to start trying to 'convert' other residents who may be too polite to tell them to go away. She is keeping a close eye on the situation.

Personal Belongings:

Resident's rooms were personalised, partly furnished with their own furniture they had brought with them from home, and belongings such as photographs, books, CD collections, and lots of them seemed to have various meerkats in their rooms. One lady invited us to see her wedding outfit for her granddaughter's wedding. The

bulk of the laundry is done in-house and returned directly to the residents. Expensive items of clothing are given to relatives to deal with or sent to the dry cleaners and the residents are later billed.

Control of their surroundings:

The communal and very pretty garden also has a section of waist high beds for residents to cultivate their own bit if they wish to. One lady was most proud of having grown enough vegetables last year to 'feed everyone a whole meal'! Rooms are personalised and vary widely in style. The Manager took us to one room which was fairly cluttered but she made the point that the lady who lived there liked it that way. The cleaners take all tastes into account and this particular room was clean albeit untidy.

Members of the team were sad to hear that residents who liked to cook were not allowed to go into the kitchen in case of accidents, and the cook went to great lengths to explain to us the possible hazards some of the residents could face if allowed into the kitchen. The team thought that previously this had been possible. Residents may not smoke indoors and as a rule the Manager does not take smokers. A lady who is a smoker and attends on a daily basis smokes outside.

Money Matters:

Residents do not handle their own money and if they need items such as shampoo or newspapers these are bought for them and billed to their accounts. The residents we met seemed too elderly to go far under their own steam and the village does not seem to have a shop or pub so this does not appear to be a major issue.

Aides to Maintain Independence:

Residents can go out whenever they wish. A day centre is nearby which some like to attend. It sounded like trips out for shopping or pleasure are mainly left to relatives to organise. There was a bit of concern for those who did not have relatives to take the out, however, all but one of the residents were being taken on a visit to a nearby hotel for lunch, tea, and entertainment.

One lady had maintained a fairly active lifestyle until recently and was out and about almost seven days a week. There are garden parties during the Summer months and other celebrations in the home for each resident's birthdays, to which families are invited. Children are actively encouraged and welcomed and are not made to sit down and behave.

Mechanical aids to independence are in place with rails, hoists, and a stair lift in place. I did, however see a notice asking residents not to attempt the stairs without calling a member of staff.

It was noted that there were telephones, music centres and TVs in the bedrooms as well as a set of keyboards! Computer access is fine by the home although currently none of the residents are computer literate. A previous resident had brought his own email equipment and used it there.

Although residents are not allowed to make their own hot drinks they can ask for one whenever they wish and alcohol is permitted.

A hair dresser and chiropodist visited regularly.
All the residents we met seemed to me to be as independent as was possible given their age/physical condition.

Any other comments about living here:

The team were most impressed by the environment, and atmosphere of the home, and by the way that staff interacted with the residents. All the residents liked it very much when asked and enjoyed the food, the in- jokes, the garden and the routine. None expressed any anxiety or shared a problem. The bulk of the interviews were carried out without a member of staff being present. A member of the visiting team found it interesting and positive that the cook (who had worked there for twenty years) brought her Mother to the home from Scotland when she became ill and that this lady had now elected to stay.

General:

Any areas of Concern:

The team had the feeling that although the home has an informal and familial feel the Manager runs a tight ship and is the powerhouse behind the whole operation. They were most impressed by her empathy, knowledge and commitment. She shared with the team that she was concerned about her business partly due to a reduction in her numbers, and not being able to fill the beds, which is most unusual, and thought that Adult Social Care no longer seemed to be offering financial support to those who wanted to go into residential care, but were offering support to enable people to stay in their own homes. She is thinking laterally and beginning to take respite patients as well as day residents. We very much hope that this is just a blip due to political change as she was concerned about loneliness and isolation for those who wanted to go into care but couldn't.

Any areas of Best Practice:

'I consider the whole home to be a shining example of good practise. I would consider myself very lucky to be placed there should the time come.'

Quote from LINK visitor

The Manager has given a lot of thought to the future of Haversam House and has put in place a comprehensive plan for the future running of the home when she retires. She assured us that the home will be kept in the family as her daughters, who are both well qualified and experienced in this field of care, will take over the reins and continue to provide a high standard of care for the residents.

Circulation

Manager – Mrs Isobel Wales (sent)
LINK Governing Body (sent)
Adult Social Care
Care Quality Commission
Upload onto LINK website

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